

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 1 OF 3  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Senate Conservatives Fund</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00448696		
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;"><input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on</span>			<div style="display: flex; justify-content: space-around;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div><div style="border: 1px solid black; padding: 2px;">D D D</div> / <div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div></div> </div> </div>		
Full Name of Payee <b>Senate Conservatives Fund</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div><div style="border: 1px solid black; padding: 2px;">D D</div> / <div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div></div> </div> </div>		
Mailing Address <b>PO Box 388</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">453.95</div>		
City <b>Alexandria</b>	State <b>VA</b>	Zip Code <b>22313-0388</b>	<b>Transaction ID : E2411C1BF3CA94E78A63</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div><div style="border: 1px solid black; padding: 2px;">D D D</div> / <div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div></div> </div> </div>		
Purpose of Expenditure <b>IE-Maness-Online Processing</b>		Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	<div style="display: flex; justify-content: space-around;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div><div style="border: 1px solid black; padding: 2px;">D D D</div> / <div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div></div> </div> </div>		
Name of Federal Candidate <b>Robert L Maness</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>LA</b>		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">194736.99</div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		

  

Full Name of Payee <b>Senate Conservatives Fund</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div><div style="border: 1px solid black; padding: 2px;">D D D</div> / <div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div></div> </div> </div>		
Mailing Address <b>PO Box 388</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">46.30</div>		
City <b>Alexandria</b>	State <b>VA</b>	Zip Code <b>22313-0388</b>	<b>Transaction ID : E3AF86EE90E014EBF95B</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div><div style="border: 1px solid black; padding: 2px;">D D D</div> / <div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div></div> </div> </div>		
Purpose of Expenditure <b>IE-Maness-Online Processing</b>		Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	<div style="display: flex; justify-content: space-around;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div><div style="border: 1px solid black; padding: 2px;">D D D</div> / <div><div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div></div> </div> </div>		
Name of Federal Candidate <b>Robert L Maness</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>LA</b>		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">46.30</div>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ▶ <b>General 2014</b>		

  

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">500.25</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Paul Kilgore*

Signature

[Electronically Filed]

Date

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FEC Schedule E (Form 24/28) Rev. 09/2013

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 2 OF 3  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Senate Conservatives Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00448696       </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Jamestown Associates</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 08 / 28 / 2014</div> </div>		
Mailing Address 5 Mapleton Rd Ste 300			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">4900.00</div>		
City Princeton	State NJ	Zip Code 08540-9646	<b>Transaction ID : EDC7E814183B94F34AC5</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 08 / 28 / 2014</div> </div>		
Purpose of Expenditure IE-Landrieu-Media Production		Category/ Type	Name of Federal Candidate Sen. Mary L Landrieu		
		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>LA</u>		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ► General 2014		

Full Name of Payee <b>Senate Conservatives Fund</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 08 / 31 / 2014</div> </div>		
Mailing Address PO Box 388			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">478.20</div>		
City Alexandria	State VA	Zip Code 22313-0388	<b>Transaction ID : E4E6F7BF35F194AA997C</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> </div>		
Purpose of Expenditure IE-Maness-Online Processing		Category/ Type	Name of Federal Candidate Robert L Maness		
		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>LA</u>		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ► General 2014		

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;">5378.20</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) <b>TOTAL</b> Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Paul Kilgore*

[Electronically Filed]

Date

MM / DD / YYYY  
09 / 05 / 2014

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 3 OF 3  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Senate Conservatives Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00448696         </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Envision Printers/Marketing</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 09 / 04 / 2014</div> </div>	
Mailing Address 2 Riverbend Pkwy		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">26214.42</div>	
City Leesburg	State VA	Zip Code 20176-0000	<b>Transaction ID : ECDA6DEFAA3784B00B7</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 09 / 04 / 2014</div> </div>
Purpose of Expenditure IE-Maness-Direct Mail Production		Category/Type	
Name of Federal Candidate Robert L Maness		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>LA</u>
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">31638.92</div>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ► General 2014

Full Name of Payee		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> </div>	
Mailing Address		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"></div>	
City	State	Zip Code	Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> </div>
Purpose of Expenditure		Category/Type	
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate State:
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ►

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;">26214.42</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>
<b>(c) TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;">32092.87</div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Paul Kilgore*

[Electronically Filed]

Date

MM / DD / YYYY  
09 / 05 / 2014

Signature